

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_ FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

|              | AS FILED |      | AFTER<br>1st AMENDMENT |      | AFTER<br>2nd AMENDMENT |      |
|--------------|----------|------|------------------------|------|------------------------|------|
|              | IND.     | DEP. | IND.                   | DEP. | IND.                   | DEP. |
| 1            | /        |      |                        |      |                        |      |
| 2            |          | /    |                        |      |                        |      |
| 3            | /        | /    |                        |      |                        |      |
| 4            | /        | /    |                        |      |                        |      |
| 5            | /        |      |                        |      |                        |      |
| 6            | /        |      |                        |      |                        |      |
| 7            | /        |      |                        |      |                        |      |
| 8            | /        |      |                        |      |                        |      |
| 9            | /        |      |                        |      |                        |      |
| 10           | /        |      |                        |      |                        |      |
| 11           | /        |      |                        |      |                        |      |
| 12           | /        | /    |                        |      |                        |      |
| 13           | /        |      |                        |      |                        |      |
| 14           | /        |      |                        |      |                        |      |
| 15           | /        |      |                        |      |                        |      |
| 16           | /        |      |                        |      |                        |      |
| 17           | /        |      |                        |      |                        |      |
| 18           | /        |      |                        |      |                        |      |
| 19           | /        |      |                        |      |                        |      |
| 20           | /        |      |                        |      |                        |      |
| 21           | /        | +    |                        |      |                        |      |
| 22           | /        |      |                        |      |                        |      |
| 23           | /        |      |                        |      |                        |      |
| 24           | /        |      |                        |      |                        |      |
| 25           | /        |      |                        |      |                        |      |
| 26           | /        |      |                        |      |                        |      |
| 27           | /        |      |                        |      |                        |      |
| 28           | /        |      |                        |      |                        |      |
| 29           | /        |      |                        |      |                        |      |
| 30           | /        |      |                        |      |                        |      |
| 31           | /        |      |                        |      |                        |      |
| 32           | /        |      |                        |      |                        |      |
| 33           | /        |      |                        |      |                        |      |
| 34           | /        |      |                        |      |                        |      |
| 35           | /        |      |                        |      |                        |      |
| 36           | /        |      |                        |      |                        |      |
| 37           | /        |      |                        |      |                        |      |
| 38           | /        |      |                        |      |                        |      |
| 39           | /        |      |                        |      |                        |      |
| 40           | /        |      |                        |      |                        |      |
| 41           | /        |      |                        |      |                        |      |
| 42           |          | 13   |                        |      |                        |      |
| 43           | /        |      |                        |      |                        |      |
| 44           | /        |      |                        |      |                        |      |
| 45           | 2        | (1)  |                        |      |                        |      |
| 46           | 3        | (1)  |                        |      |                        |      |
| 47           | 4        | (1)  |                        |      |                        |      |
| 48           | 5        | (1)  |                        |      |                        |      |
| 49           | 6        | (1)  |                        |      |                        |      |
| 50           | 7        | (1)  |                        |      |                        |      |
| TOTAL IND.   | 4        | -    |                        |      |                        |      |
| TOTAL DEP.   | 123      | -    |                        |      |                        |      |
| TOTAL CLAIMS | 107      |      |                        |      |                        |      |

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS